

Under the Emergency Regulations Act of 1935, no person is required to respond to a question or information which might tend to incite anti-American activities.

CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/723576
Filing Date	11/26/2003
First Named Inventor	David Watzke
Art Unit	3761
Examiner Name	N. Siohway
Attorney Docket Number	211485-10002

I hereby revoke all previous powers of attorney given in the above identified application.


☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

69130

☒ Please change the correspondence address for the above-identified application to:

 The address associated with Customer Number:

GA 139

CR

☐ Firm or
Individual Name

Address

Only

342

310

Country

Telephone

【附註】

Karen Under

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/06)

SIGNATURE of Applicant or Assignee of Record

Signature:

Matte

David W. Burke

Disco

12/3/57

Teaching

12101 505-2806

DATE: 12/3/07

NOTE: Signatures of all the members or designees of board of the major league or professional sports club required. Submit multiple forms if more than one signature is required. See below.

☒ - Report of Incident not submitted

☒ (Type of form and number)
Fast collection of information is required by 37 CFR 1.50. This information is required to obtain a patent or control by the State which is so tied to the USPTO as to require an application. Confidentiality is provided by 35 U.S.C. 122 and 37 CFR 1.51 and 1.54. This collection is collected to allow 3 minutes to complete, excluding gathering, preparing, and searching the completed application form to the USPTO. There will vary depending upon the individual case. Any comments concerning gathering, preparing, and searching the completed application form to the USPTO, please send to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1460, Alexandria, VA 22313-1460. DO NOT SEND FEE ON COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.

if the need arises to comply the form and HHS-PTC-222 and submit section 2

ARMED & DANGEROUS
W. J. CROOKER, JR. 141

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/723576
Filing Date	11/20/2003
First Named Inventor	David Watzke
Art Unit	3781
Examiner Name	N. Elashway
Attorney Docket Number	211485-10002

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number

09139

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

09139

OR

☐ Firm or
Individual Name

Address

City

State

Zip

Country

Telephone

Email

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

Maureen Watzke

Date

12/3/07

Telephone

(310) 804-2805

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representatives are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 form are submitted.

This collection of information is required by 37 CFR 1.30. The information is required to obtain or regain a patent by the public which is to be filed by the USPTO to process an application. Confidentiality is required by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual type. Any comments on the official of this you request to complete this form or suggestions for reducing the burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEE OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

You need assistance completing this form, call 1-800-PATENT and 646-927-2000.

Approved by LegiScribe Inc.
www.LegiScribe.com